

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10-765757  
APPLICANT(S)

FILING DATE

## CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		3				
6		4				
7		3				
8		3				
9		4				
10		3				
11		4				
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TOTAL IND.	52					
TOTAL DEP.						
TOTAL CLAIMS	52					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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